

Fond du Lac County Health Department

160 S. Macy St, Fond du Lac, WI 54935 Phone: 920-929-3085 | Fax: 920-929-3102 | www.fdlco.wi.gov



FOR CENTRAL OFFICE USE ONLY						
Conditional: HOLD RELEASE						
Permit: HOLD RELEASE						
PERMIT DATE ISSUED:						
CHECK CASH CREDIT						
FEE(S) PAID: AMOUNT DEPOSITED:						
In Health Space:						

LODGING, RECREATIONAL FACILITY and BODY ART LICENSE APPLICATION

Wis. Stat. Ch. 97, WI Admin Code ATCP 73, 75, 76, 78, 79. DSPS 221

Your facility may not begin operations until your business has been inspected & the license released. Notify the Health Department of plans to operate at least 30 days prior to planned operational date.

ESTABLISHMENT INFORMATION	l:							
ESTABLISHMENT NAME			CONTACT PERSON			ESTABLISHMENT PHONE:		
ESTABLISHMENT STREET ADDRESS CITY			CITY	CITY		STATE	ZIP	
E-MAIL ADDRESS						INTENDE OPERATI	D DATE OF ON	
LEGAL ENTITY INFORMATION -	Check ONE							
☐ Individual ☐ Married Couple ☐ Limited Liability Company (LLC)			☐ Limited Liability Partnership (LLP)			☐ Corporation		
☐ Cooperative ☐ Partnershi				In What State Is Your Entity Registered?				
LEGAL ENTITY (such as name of sole proprietor, partnership, LLC, LLP, or Inc.)								
LEGAL ENTITY MAILING ADDRESS			CITY		STATE	ZIP		
EMAIL ADDRESS	MAIL ADDRESS LEGAL ENTITY PHONE () -				TY PHONE NU -	NUMBER		
CONTACT PERSON	TITLE	PHONE NUMBER	R EMAIL ADDRESS		RESS			
LICENSE INFORMATION								
□ NEW BUILDING CONSTRUCTION AND LICENSE □ CHANGE OF OPERATOR WITH REMODEL*								
☐ CHANGE OF OPERATOR WITH Water: Public ☐ Private ☐		FYING AN EXISTI Public □ Private						
vvaler. Fublic 🗆 Frivale 🗆		Fublic - Flivate	Ш					
LODGING ATCP 72*** ATCP 73 B	BED & BREAKFAST					# 0	of Sleeping Rooms	
□ Tourist Rooming House (1-4 rooms) (cabin, cottage, etc) \$ 438.00 (\$138.00 License fee + \$ 300.00 Preinspection fee) (Approval needed by the municipality before licensing will occur for a Tourist Rooming House) □ Hotel/Motel/Resort (5-30 rooms) \$ 745.00 (\$265.00 License fee + \$480.00 Preinspection fee)								
☐ Hotel/Motel/Resort (31-99 rooms) \$1065.00 (\$400.00 Lices			ense fee + \$ 665.00 Preinspection fee)					
☐ Hotel/Motel/Resort (100-199 rooms) \$1310.00 (\$515.00 License fee + \$ 795.00 Preinspection fee)								
□ Hotel/Motel/Resort (200+ rooms) \$1753.00 (\$568.00 License fee + \$1185.00 Preinspection fee)								
□ Bed & Breakfast (8 or less rooms) \$ 462.00 (\$162.00 License fee + \$ 300.00 Preinspection fee)								
Lodging Facility − Does the facility have a restaurant for tourists, transients or guests on the premises? □ Yes □ No								
CAMPGROUND ATCP 79***						# 0	of Camp Sites	
□ Campground (1-25 Sites) \$ 624.00 (\$244.00 License fee + \$380.00 Preinspection fee)								
□ Campground (26-60 Sites) \$ 863.00 (\$298.00 Licen			nse fee + \$565.00 Preinspection fee)					
☐ Campground (51-99 Sites) \$1098.00 (\$398.00 License			ense fee + \$700.0	00 Preinspec	tion fee)			
☐ Campground (100-199 Sites) \$1298.00 (\$468.00 Lic			ense fee + \$830.0	00 Preinspec	tion fee)			
□ Campground (200+ Sites) \$1493.00 (\$528.00 License fee + \$965.00 Preinspection fee)								
Campground Facility – Does the facility have a restaurant for patrons? Yes No Layout and plan must be submitted with application for new and remodeled camps.								

RECREATIONAL & EDUCATIONAL CAMP ATCP 78***								
□ \$1756.00 (\$556.00 License fee + \$1200.00 Preinspection fee)								
Total Capacity of Camp (maximum number of persons accommodated at one time):								
SWIMMING POOL (per pool) ATCP 76***								
□ \$589.00 (\$339.00 License fee + \$250.00	Preinspection fee)							
Type of pool (indicate the number of each	type of pool on property in check	box):						
□ Cold Soak (below 72° F)	☐ Experimental	□ Exercise						
☐ Combination	□ Lap	□ Lap □ Wading						
☐ Diving	☐ Mobile	☐ Whirlpool						
Department of Safety & Professional Services (DSPS) plan of approval required for new/altered/modified pools.								
WATER ATTRACTION (per attraction) ATCP	76***							
□ \$678.00 (\$378.00 License fee + \$300.00	Preinspection fee)							
Type of water attraction (indicate the num		property in check box):						
☐ Activity	□ Vortex							
☐ Interactive Play Attractions	□ Wave	□ Leisure River						
□ Leisure River	☐ Zero-Depth Entry	□ Vanishing Edge						
DSPS plan of approval required for new/alt	·							
	-							
WATER ATTRACTION (with up to 2 Pool slice) Note: This section includes any pool with a								
☐ Water Attraction (with up to 2 pool slides/								
☐ Per Waterslide or Pool Slide (in excess of	2 per basin) \$420.00	(\$270.00 License fee+\$150.00 Preinspe	ction fee)					
DSPS plan of approval required for new/alte	ered/modified pools.							
BODY ART SPS 221***								
□ Tattoo	\$419.00 (\$179.00 Licens	e fee + \$240.00 Preinspection fee)						
□ Body Piercing	\$419.00 (\$179.00 License fee + \$240.00 Preinspection fee)							
□ Tattoo & Body Piercing	\$526.00 (\$286.00 License fee + \$240.00 Preinspection fee)							
DSPS Practitioner License #	Practition	oner Name						
DSPS Practitioner License #	Practition	oner Name						
DSPS Practitioner License #	Practition	oner Name						
Total Amount Enclosed: \$								
Legisent to entry on the premises by the Fond du Lac County Health Department personnel for purposes of inspection at all								
I consent to entry on the premises by the Fond du Lac County Health Department personnel for purposes of inspection at all reasonable hours.								
*** To obtain a copy of the code that covers your permit, search online for the code listed above for which you are applying. Licenses are NOT transferable. All licenses expire on June 30 th annually.								
Wis. Stat. § § 97.67 (5) and 97.605 (1)(c) "No license may be issued until all applicable fees have been paid." Wis. Stat. § 97.605 (1)(a) "No person may conduct, maintain, manage or operate a hotel, restaurant, temporary restaurant, tourist rooming house, vending machine commissary or vending machine if the person has not been issued an annual license by the department or by a local health department that is granted agent status under s. 97.615 (2)."								
Your signature below will acknowledge that you have received a copy of the code or information as to where to obtain a copy and will comply with all applicable Wisconsin Administrative Code(s). Personally identifiable information you provide may be used for purposes other than that for which it was collected. Wis. Stat. §15.04 (1)(m).								
SIGNATURE - APPLICANT			DATE SIGNED					